Next Generation NCLEX (NGN) A Practice Exam (Sample)

Study Guide



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Questions



- 1. What dietary change is essential for a client with heart failure?
 - A. Increase protein intake
 - B. Avoid high-fiber foods
 - C. Limit sodium intake
 - D. Incorporate more sugary snacks
- 2. Which factor is crucial when tailoring information to promote patient understanding?
 - A. Using complex terminology
 - B. Considering the patient's background and learning style
 - C. Providing information without context
 - D. Assuming all patients have the same level of understanding
- 3. What is the aim of the case studies used in NGN?
 - A. To assess only the written abilities of nursing candidates
 - B. To simulate real-life situations requiring clinical decision-making
 - C. To prepare candidates for memorization tests
 - D. To eliminate the need for clinical experience
- 4. How important is continuous education in preparing for the NGN?
 - A. Somewhat important, but not crucial
 - B. Vital, as nursing practices and standards continuously evolve
 - C. Only necessary for new graduates
 - D. Not necessary if experience is sufficient
- 5. A client refuses a blood transfusion due to religious beliefs. What should the nurse do?
 - A. Encourage the client to reconsider
 - B. Withhold the blood transfusion
 - C. Consult with a hospital ethics board
 - D. Proceed with transfusion with consent from family

- 6. What statement indicates a client is ready to learn about insulin self-administration?
 - A. "I cannot find my glasses right now."
 - B. "I can concentrate best in the morning."
 - C. "I have a lot of other things on my mind."
 - D. "I've already attended a seminar on diabetes."
- 7. How does the NGN encourage professional development among nurses?
 - A. By promoting passive learning experiences
 - B. By fostering ongoing education and engagement with new practices and technologies
 - C. By discouraging feedback and collaboration
 - D. By isolating advanced practice nurses from newcomers
- 8. Which dietary recommendation should a nurse provide to a client diagnosed with hyponatremia?
 - A. Increase fiber intake
 - B. Limit protein intake
 - C. Increase sodium intake as appropriate
 - D. Adhere to a carbohydrate-restrictive diet
- 9. What role does technology play in the NGN exam?
 - A. It assesses a nurse's ability to utilize health information technology appropriately
 - B. It eliminates the need for hands-on skills assessments
 - C. It focuses exclusively on the theoretical application of technology
 - D. It promotes the use of outdated methods over current practices
- 10. When a client has had a stroke resulting in aphasia and dysphasia, which task should be assigned to assistive personnel?
 - A. Measure the client's BP after medication
 - B. Assist the client with a partial bed bath
 - C. Use a communication board to ask for lunch
 - D. Monitor the client's neurological status

Answers



- 1. C 2. B
- 3. B

- 3. B 4. B 5. B 6. B 7. B 8. C 9. A 10. B



Explanations



1. What dietary change is essential for a client with heart failure?

- A. Increase protein intake
- B. Avoid high-fiber foods
- C. Limit sodium intake
- D. Incorporate more sugary snacks

Limiting sodium intake is essential for a client with heart failure because excess sodium can lead to fluid retention, which exacerbates the condition. When sodium is consumed in large amounts, it causes the body to retain water, increasing blood volume and putting additional strain on the heart. For individuals with heart failure, this can worsen symptoms such as shortness of breath and swelling in the legs and abdomen. By reducing sodium intake, clients can help manage their fluid balance, improve heart function, and potentially reduce the need for diuretics, which are often prescribed to help eliminate excess fluid. The recommended sodium restriction often includes aiming for less than 2,000 milligrams per day, depending on the specific guidelines provided by healthcare professionals. This dietary adjustment can play a significant role in the overall management and stabilization of heart failure symptoms.

2. Which factor is crucial when tailoring information to promote patient understanding?

- A. Using complex terminology
- B. Considering the patient's background and learning style
- C. Providing information without context
- D. Assuming all patients have the same level of understanding

Considering the patient's background and learning style is essential when tailoring information to promote understanding because it acknowledges that each patient is unique. Factors such as age, cultural background, education level, and preferred learning style significantly influence how individuals process and comprehend information. By personalizing communication to align with these aspects, healthcare providers can enhance patient engagement and retention of information, ultimately leading to better health outcomes. For instance, a patient with a background in healthcare may understand medical terminology more easily than one without such knowledge, necessitating a different approach in the way information is presented. Additionally, recognizing whether a patient learns best through visual aids, verbal explanations, or hands-on demonstrations allows for a more effective educational experience. This tailored approach fosters a supportive and effective learning environment, encouraging patients to be active participants in their healthcare.

- 3. What is the aim of the case studies used in NGN?
 - A. To assess only the written abilities of nursing candidates
 - B. To simulate real-life situations requiring clinical decision-making
 - C. To prepare candidates for memorization tests
 - D. To eliminate the need for clinical experience

The aim of the case studies used in Next Generation NCLEX (NGN) is to simulate real-life situations requiring clinical decision-making. This approach allows nursing candidates to demonstrate their ability to think critically, apply knowledge in practical scenarios, and engage in the problem-solving process that is crucial in nursing practice. Case studies emulate the complexities of patient care, encouraging candidates to integrate their theoretical understanding with clinical judgment while considering various factors such as patient history, current conditions, and possible interventions. This method fosters a hands-on learning experience that is reflective of actual healthcare environments, ultimately better preparing candidates for real-world nursing responsibilities. Focusing on written abilities or memorization does not fully capture the essence of nursing, which involves effectively assessing and addressing patient needs in dynamic situations. Similarly, eliminating the need for clinical experience undermines the foundational skills and knowledge that are developed through practical engagement in healthcare settings. Therefore, the use of case studies is central to enhancing the decision-making skills that nursing candidates need to succeed in their future careers.

- 4. How important is continuous education in preparing for the NGN?
 - A. Somewhat important, but not crucial
 - B. Vital, as nursing practices and standards continuously evolve
 - C. Only necessary for new graduates
 - D. Not necessary if experience is sufficient

Continuous education is vital in preparing for the Next Generation NCLEX (NGN) for several compelling reasons. First, the nursing profession is marked by rapid changes in practices, technologies, and standards of care. The NGN incorporates these evolving practices into its framework, requiring candidates to be informed and adept at current protocols and evidence-based care. Moreover, ongoing education helps nurses develop critical thinking and clinical judgment skills, which are essential components of the NGN. As the NCLEX evolves to reflect real-world scenarios that nurses face, a solid foundation of current knowledge through continuous education prepares candidates to approach these situations effectively. Engaging in continuous education also supports lifelong learning, a principle that enhances professional competency and confidence. It fosters an awareness of emerging trends and innovations in healthcare, ensuring that nurses remain up-to-date and capable of delivering safe and effective care. Therefore, continuous education is not just an add-on but a crucial element in fostering readiness for the NGN and advancing professional excellence in nursing.

- 5. A client refuses a blood transfusion due to religious beliefs. What should the nurse do?
 - A. Encourage the client to reconsider
 - B. Withhold the blood transfusion
 - C. Consult with a hospital ethics board
 - D. Proceed with transfusion with consent from family

When a client refuses a blood transfusion due to religious beliefs, it is essential for the nurse to respect the client's autonomy and decision-making regarding their own healthcare. The right to refuse treatment is a fundamental principle in healthcare, rooted in respect for patient autonomy and informed consent. Withholding the blood transfusion aligns with these ethical principles, as the nurse must honor the client's expressed wishes. It reflects a commitment to patient-centered care, meaning the health care provider acknowledges the individual values and beliefs that influence the client's decisions about their health. While it might be tempting to encourage the client to reconsider or to involve family members in decision-making, those actions could undermine the client's right to make their own informed choices regarding their treatment. Consulting a hospital ethics board is a measure often used for complex cases, but in this instance, the client's refusal based on personal belief is clear and does not require further ethical deliberation. Respect for the client's decision should take precedence.

- 6. What statement indicates a client is ready to learn about insulin self-administration?
 - A. "I cannot find my glasses right now."
 - B. "I can concentrate best in the morning."
 - C. "I have a lot of other things on my mind."
 - D. "I've already attended a seminar on diabetes."

A statement indicating that a client is ready to learn about insulin self-administration is one that demonstrates their ability to focus and engage with the teaching material effectively. The remark about concentrating best in the morning suggests that the client is aware of their optimal learning conditions and is likely prepared to absorb new information when they are most alert and attentive. Being ready to learn involves not only the availability of time and resources but also the mental readiness of the client. This readiness is characterized by good concentration and the ability to prioritize learning over other concerns. Recognizing one's most effective learning times indicates a proactive attitude toward managing their health. The other statements indicate barriers to learning. For instance, not being able to find glasses reflects a potential distraction that could hinder effective learning, while having a lot on one's mind suggests that the client's focus is divided, making it difficult to concentrate on new information. Attending a seminar on diabetes may indicate some prior knowledge, but it does not inherently reflect readiness to learn at that moment; it could suggest overconfidence or a need for a refresher rather than a preparedness to engage in further learning about insulin self-administration specifically.

7. How does the NGN encourage professional development among nurses?

- A. By promoting passive learning experiences
- B. By fostering ongoing education and engagement with new practices and technologies
- C. By discouraging feedback and collaboration
- D. By isolating advanced practice nurses from newcomers

The Next Generation NCLEX (NGN) promotes professional development among nurses by fostering ongoing education and engagement with new practices and technologies. This approach is essential in the ever-evolving field of healthcare, where staying current with the latest evidence-based practices, technologies, and competencies is critical for effective patient care. By encouraging a culture of continuous learning, the NGN ensures that nurses are not only equipped with foundational knowledge but are also adaptable to changes within the healthcare environment. This includes understanding new theories, developing skills, and applying innovative solutions to improve patient outcomes. Such engagement helps nurses build their professional competencies, enhances their critical thinking abilities, and prepares them for real-world challenges. In addition, this focus on continuous professional development fosters a collaborative environment where nurses can share knowledge, experiences, and feedback. This interaction further enriches their practice and strengthens the nursing profession as a whole.

8. Which dietary recommendation should a nurse provide to a client diagnosed with hyponatremia?

- A. Increase fiber intake
- B. Limit protein intake
- C. Increase sodium intake as appropriate
- D. Adhere to a carbohydrate-restrictive diet

In cases of hyponatremia, where there is a low concentration of sodium in the blood, increasing sodium intake is the most appropriate dietary recommendation. Sodium plays a crucial role in maintaining fluid balance, nerve function, and muscle contractions. When sodium levels are low, the body can experience symptoms such as confusion, muscle weakness, and in severe cases, seizures and coma. By suggesting an increase in sodium intake, the nurse aims to help restore normal sodium levels in the body, which is essential for proper physiological function. This approach can involve dietary modifications such as adding salt to foods, consuming foods that are higher in sodium, or possibly using electrolyte-containing beverages, depending on the severity of the condition and the underlying cause of the hyponatremia. Other dietary modifications such as increasing fiber, limiting protein, or adhering to a carbohydrate-restrictive diet are not directly relevant to the management of hyponatremia, as they do not address the critical need to replenish sodium levels in the body. Hence, the emphasis on sodium intake is the most pertinent and effective recommendation for this condition.

9. What role does technology play in the NGN exam?

- A. It assesses a nurse's ability to utilize health information technology appropriately
- B. It eliminates the need for hands-on skills assessments
- C. It focuses exclusively on the theoretical application of technology
- D. It promotes the use of outdated methods over current practices

The correct answer highlights the importance of technology in the Next Generation NCLEX (NGN) exam by emphasizing the assessment of a nurse's ability to utilize health information technology appropriately. In the context of modern healthcare, the integration of technology is crucial for effective patient care, enhancing communication, and improving outcomes. The NGN exam incorporates scenarios and questions that require candidates to demonstrate their competency in using electronic health records, telehealth systems, and other digital tools that are integral to contemporary nursing practice. This focus prepares future nurses to engage with the technological advancements they will encounter in their professional environments, ensuring they can navigate and leverage these resources to deliver high-quality care. By assessing this skill set, the NGN exam aligns with the evolving landscape of healthcare and the essential competencies necessary for nurses today.

- 10. When a client has had a stroke resulting in aphasia and dysphasia, which task should be assigned to assistive personnel?
 - A. Measure the client's BP after medication
 - B. Assist the client with a partial bed bath
 - C. Use a communication board to ask for lunch
 - D. Monitor the client's neurological status

Assisting a client with a partial bed bath is an appropriate task for assistive personnel, as this involves providing personal hygiene assistance that does not require specialized nursing judgment or assessment skills. This task is focused on the client's comfort and basic care needs, which the assistive personnel is trained to handle. In contrast, tasks such as measuring blood pressure after medication would require knowledge of the implications of the blood pressure readings, medication effects, and potential need for further nursing assessment. Monitoring the client's neurological status involves critical observation and comprehensive assessment skills that fall within the scope of nursing practice. Using a communication board, while beneficial for the client, requires some level of instruction and may be more effectively conducted by nursing staff who can interpret the client's responses and adjust communication methods as necessary.